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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *MS*\*\* FOREIGN APPLICATIONS \*\*\*\*\* *MS*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*  
 10/20/2000

\*\* SMALL ENTITY \*\*

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY FL	SHEETS DRAWING 17	TOTAL CLAIMS 49	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>MS</i>				

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## TITLE

System and method for managing mobile workers

<b>FILING FEE RECEIVED</b> 761	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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